

INK—THIS IS A PERMANENT RETURN must be made for each birth stated.

of each -

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 141
Registered No. 798

1. PLACE OF BIRTH

County Kila State Arizona
District or Township Live Oak or Village
City Miami No. 46 Live Oak Cyn St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Gregoria Udahe

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other born 5. Legitimate? yes 6. Date of birth Nov. 17 1927 Month Nov Day 17 Year 1927
(If child is not yet named, make supplemental report, as directed.)

8. Full name Silvestre Udahe FATHER 14. Full maiden name Francina Ruiz MOTHER

9. Residence (Usual place of abode) Miami, Arizona 15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state. If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 40 (Years) 16. Color or race Mexican 17. Age at last birthday 35 (Years)

12. Birthplace (city or place) Mexico (State or country) 18. Birthplace (city or place) Mexico (State or country)

13. Occupation Miner Nature of Industry Copper 19. Occupation Housewife Nature of Industry

20. Number of children of this mother 10 (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 6 (b) Born alive but now dead 4 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was alive at 9:30 P. m. on the date above stated
(Born alive or stillborn)

Signature J. J. Muller
Address Miami, Arizona
(Physician or midwife)

Given name added from a supplemental report Month, day, year

Filed Dec 20, 1927 Registrar

745-1117-699